



# Ethiopian Law Society for Development (E.L.S.D)

## Membership form

Fill the following form

1. Full Name \_\_\_\_\_
2. Gender Male  Female
3. Date of Birth Date \_\_\_\_\_ Month \_\_\_\_\_ Year \_\_\_\_\_
4. Nationality \_\_\_\_\_
  
5. Current Address \_\_\_\_\_ Region \_\_\_\_\_ Town \_\_\_\_\_  
Woreda \_\_\_\_\_ Kebele \_\_\_\_\_ House Number \_\_\_\_\_
6. Telephone number \_\_\_\_\_
7. Email \_\_\_\_\_
8. Highest educational qualification \_\_\_\_\_
  
9. Current work address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
  
10. Previous work address \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

11. Tick one or two of the ELSD teams below as you would like to join!

No	Teams	/ tick
1.	Legal research	
2.	Publication and dissemination	
3.	Legal education	
	<b>3.1</b> Short term training	
	<b>3.2</b> Legal education campaign through media team	
	<b>3.3</b> Assisting formal legal education	
4.	Free legal service	
5.	Workshops and seminar	

12. Declaration

I hereby agree with and abide by the terms of memorandum of association as a member of 'Ethiopian Law Society for Development charitable society'.

Name \_\_\_\_\_

Signature \_\_\_\_\_

Date \_\_\_\_\_